

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED.
SECRETARY OF THE SENATE

12 MAY 24 PM 4:11

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

12FE4M5

Greg Sowards For Senate LLC

ADDRESS (number and street)

2916 Maese Ln

Check if different
than previously
reported. (ACC)

Las Cruces

NM

88007

- 2.
- FEC IDENTIFICATION NUMBER ▼**

C C00448423

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

NM

00

- 4.
- TYPE OF REPORT**
- (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM 06

DD 05

YYYY 2012

in the
State of

NM

(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

MM 06

DD 05

YYYY 2012

in the
State of

NM

5. Covering Period

MM 04

DD 01

YYYY 2012

through

MM 05

DD 16

YYYY 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MELODIE JOHNSON

Signature of Treasurer

MELODIE JOHNSON*Melodie Johnson*

Date

MM 05

DD 24

YYYY 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)